

APR 04 2016

FEB 29 2016

FILE NO. L2072212-1FILE NO. L2072212-1

DO NOT WRITE ABOVE THIS LINE; RESERVED FOR ACC USE ONLY.

ARTICLES OF ORGANIZATION*Read the Instructions L010i***1. ENTITY TYPE - check only one to indicate the type of entity being formed:**☒ **LIMITED LIABILITY COMPANY**
(entity name must contain
the words "Limited Liability
Company" or "LLC")☐ **PROFESSIONAL LIMITED LIABILITY COMPANY**
(entity name must contain the words
"Professional Limited Liability Company" or
"PLLC")**2. ENTITY NAME - see Instructions L010i for full naming requirements - give the exact name of the LLC:**NAILS BY CJ, LLC**3. PROFESSIONAL LIMITED LIABILITY COMPANY SERVICES -** If and only if professional LLC is checked in number 1 above, describe the professional services that the professional LLC will provide (examples: law firm, accounting, medical):

4. STATUTORY AGENT for service of process - see Instructions L010i**4.1 REQUIRED -** give the name (can be an Arizona resident or an Arizona-registered entity) and physical or street address (not a P.O. Box) in Arizona of the statutory agent:OANH H. TRAN

Statutory Agent Name

4.2 OPTIONAL - mailing address in Arizona of Statutory Agent (can be a P.O. Box):

Attention (optional)

8306 EAST STATE ROUTE 69

Address 1

Attention (optional)

Address 1

Address 2 (optional)

City PRESCOTT VALLEYState AZZip 86314

Address 2 (optional)

City

State AZ

Zip

4.3 REQUIRED - the Statutory Agent Acceptance form M002 must be submitted along with these Articles of Organization.**5. ARIZONA KNOWN PLACE OF BUSINESS ADDRESS:**

- 5.1** Is the Arizona known place of business address the same as the street address of the statutory agent? ☒ Yes - go to number 6 and continue
☐ No - go to number 5.2 and continue

- 5.2** If you answered "No" to number 5.1, give the physical or street address (not a P.O. Box) of the known place of business of the LLC in Arizona:

Attention (optional)		
Address 1		
Address 2 (optional)		
City	State or Province	Zip
<u>U.S.A.</u>	<u>AZ</u>	

APPROVED FOR RELEASE

UNCLASSIFIED

DATE

10/2/98

6. DURATION - If the duration or life period of the LLC is perpetual (forever), then skip this section and continue to number 7 or number 8. Otherwise, check only one box below and fill in the corresponding blank:

- ☐ The LLC's life period will end on this date: _____ (enter a date)
- ☒ The LLC's life period will end upon the occurrence of this event: (describe an event)

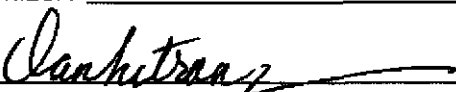
WHEN SALON IS NO LONGER PROVIDING SERVICES

COMPLETE NUMBER 7 OR NUMBER 8 - NOT BOTH.

- 7. MANAGER-MANAGED LLC** - see *Instructions L010i* - check this box ☐ if management of the LLC will be vested in a manager or managers (meaning one or more managers will run the company) and complete and attach ONLY the Manager Structure Attachment form L040. (Both members and managers will be listed on the Manager Structure Attachment.) *The filing will be rejected if it is submitted without the attachment.*
- 8. MEMBER-MANAGED LLC** - see *Instructions L010i* - check this box ☒ if management of the LLC will be reserved to the members (meaning all members will run the company together if there is no operating agreement stating otherwise), and complete and attach ONLY the Member Structure Attachment form L041. (All members will be listed on the Member Structure Attachment.) *The filing will be rejected if it is submitted without the attachment.*
- 9. ORGANIZERS and SIGNATURE** - the individual or pre-existing entity submitting this document is the Organizer - list the name of the Organizer below. If the Organizer is an individual, that individual must sign below. If the Organizer is a pre-existing entity, provide the signature of the individual acting for that entity, then print the individual's name.

The person signing below declares and certifies under penalty of perjury that the information contained within this document together with any attachments is true and correct, and is submitted in compliance with Arizona law.

Organizer: OANH H. TRAN


Signature

3/29/2016
Date

Printed Name (If different from Organizer)

Filing Fee: \$50.00 (regular processing)
Expedited processing - add \$35.00 to filing fee.
All fees are nonrefundable - see Instructions.

Mail: Arizona Corporation Commission
Corporate Filings Section
1300 W. Washington St., Phoenix, Arizona 85007
Fax: 602-542-4100

Please be advised that A.C.C. forms reflect only the minimum provisions required by statute. You should seek private legal counsel for those matters that may pertain to the individual needs of your business.

All documents filed with the Arizona Corporation Commission are public record and are open for public inspection.
If you have questions after reading the Instructions, please call 602-542-3026 or (within Arizona only) 800-345-5819.



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MEMBER STRUCTURE ATTACHMENT

1. **ENTITY NAME** – give the exact name of the LLC (foreign LLCs – give name in domicile state or country):

NAILS BY CJ, LLC

2. **A.C.C. FILE NUMBER** (if known): L20722121

Find the A.C.C. file number on the upper corner of filed documents OR on our website at: <http://www.azcc.gov/Divisions/Corporations>

3. **MEMBERS** – give the name and address of **all** Members. If more space is needed, use another Member Structure Attachment form.

1. JUDY HP DANG Name Address 1 8306 EAST STATE ROUTE 69 Address 2 (optional) PRESCOTT VALLEY AZ 86314 City UNITED STATES State or Province Zip Country	2. OANH H. TRAN Name Address 1 8306 EAST STATE ROUTE 69 Address 2 (optional) PRESCOTT VALLEY AZ 86314 City UNITED STATES State or Province Zip Country
3. Name Address 1 Address 2 (optional) City State or Province Zip Country	4. Name Address 1 Address 2 (optional) City State or Province Zip Country
5. Name Address 1 Address 2 (optional) City State or Province Zip Country	6. Name Address 1 Address 2 (optional) City State or Province Zip Country
7. Name Address 1 Address 2 (optional) City State or Province Zip Country	8. Name Address 1 Address 2 (optional) City State or Province Zip Country



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STATUTORY AGENT ACCEPTANCE

Please read Instructions M002i

1. **ENTITY NAME** – give the **exact** name in Arizona of the corporation or LLC that has appointed the Statutory Agent (this must match exactly the name as listed on the document appointing the statutory agent, e.g., Articles of Organization or Article of Incorporation):

NAILS BY CJ, LLC

2. **STATUTORY AGENT NAME** – give the exact name of the Statutory Agent appointed by the entity listed in number 1 above (this will be *either* an individual or an entity). **NOTE** - the name must match **exactly** the statutory agent name as listed in the document that appoints the statutory agent (e.g. Articles of Incorporation or Articles of Organization), including any middle initial or suffix:

OANH H. TRAN

3. STATUTORY AGENT SIGNATURE:

By the signature appearing below, the Individual or entity named in number 2 above accepts the appointment as statutory agent for the entity named in number 1 above, and acknowledges that the appointment is effective until the appointing entity replaces the statutory agent or the statutory agent resigns, whichever occurs first.

The person signing below declares and certifies *under penalty of perjury* that the information contained within this document together with any attachments is true and correct, and is submitted in compliance with Arizona law.


Signature

OANH H. TRAN
Printed Name

03/29/2016
Date

REQUIRED – check only one:

☒ **Individual as statutory agent:** I am signing on behalf of myself as the individual (natural person) named as statutory agent.

☐ **Entity as statutory agent:** I am signing on behalf of the entity named as statutory agent, and I am authorized to act for that entity.

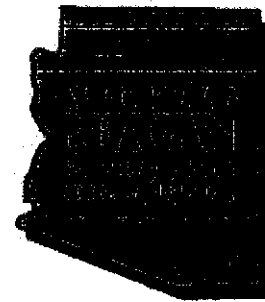
Filing Fee: none (regular processing)
Expedited processing – not applicable.
All fees are nonrefundable – see Instructions.

Mail: Arizona Corporation Commission – Corporate Filings Section
1300 W. Washington St., Phoenix, Arizona 85007
Fax: 602-542-4100

Please be advised that A.C.C. forms reflect only the minimum provisions required by statute. You should seek private legal counsel for those matters that may pertain to the individual needs of your business.
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If you have questions after reading the Instructions, please call 602-542-3026 or (within Arizona only) 800-345-5819.

STATE OF ARIZONA

Department of State



TRADE NAME AMENDMENT

NAILS BY CJ

I, Michele Reagan, Secretary of State, do hereby certify that in accordance with the Trade Name Amendment filed in this Office, the Trade Name herein certified has been duly registered pursuant to Section 44-1460, Arizona Revised Statutes, in behalf of:

JUDY HP DANG
OANH H. TRAN
8306 STATE ROUTE 69
PRESCOTT VALLEY AZ 86314-

11/17/2015 Amendment
8/14/2015 Application



Registration Date: 08/14/2015

Expiration Date: 8/14/2020

Date First Used: 8/14/2015

Trade Name No.: 628116

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of the State of Arizona. Done at Phoenix, the capitol, this 17 day of November, 2015.

Michele Reagan

MICHELE REAGAN

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ARTICLES OF ORGANIZATION

1. ENTITY TYPE: LIMITED LIABILITY COMPANY

2. ENTITY NAME: NAILS BY CJ, LLC

3. FILE NUMBER: L20722121

4. STATUTORY AGENT NAME AND ADDRESS:

Street Address:

Mailing Address:

OANH HOANG TRAN

8306 EAST STATE ROUTE 69

PRESCOTT VALLEY, AZ 86314

5. ARIZONA KNOWN PLACE OF BUSINESS ADDRESS:

8306 EAST STATE ROUTE 69

PRESCOTT VALLEY, AZ 86314

6. DURATION: Perpetual

7. MANAGEMENT STRUCTURE: Member-Managed

The names and addresses of all Members are:

1 OANH HOANG TRAN

2 JUDY HOANG PHUONG DANG

8306 EAST STATE ROUTE 69

8306 EAST STATE ROUTE 69

PRESCOTT VALLEY, AZ 86314

PRESCOTT VALLEY, AZ 86314

ORGANIZER: Oanh Hoang Tran

2/29/2016

COMMISSIONERS
DOUG LITTLE - Chairman
BOB STUMP
BOB BURNS
TOM FORESE
ANDY TOBIN



JODI JERICH
Executive Director

PATRICIA L. BARFIELD
Director
Corporations Division

ARIZONA CORPORATION COMMISSION

NAILS BY CJ, LLC
OANH HOANG TRAN
8306 EAST STATE ROUTE 69

PRESCOTT VALLEY, AZ 86314

Effective Date: 03/02/2016
File No: L-2072212-1

We have received a document submission for the above-referenced entity. If an acceptable form of payment for the correct filing fee was received, it has been deposited and is nonrefundable pursuant to statute, unless otherwise noted below. The document is **REJECTED** and is being returned for the following reasons:

There is an existing trade name or limited partnership with this name on record with the Arizona Secretary of State. You must select another name which is distinguishable from other names on the record. To check the availability of or reserve an entity name, you can visit our website at <http://ecorp.azcc.gov>.

The resubmitted document must have a physical (written, not typed) signature.

The submitted document requires a statutory agent acceptance consenting to the appointment, with the statutory agent's signature. The statutory agent's signature must be a physical (written, not typed) signature.

The name of the owner of the trade name must appear within the document exactly as listed on the trade name registration.

IMPORTANT INFORMATION:

Follow the instructions below to resubmit your document. If you originally paid for expedited processing, the resubmitted document will be processed within the current posted expedited time frame after we receive the resubmission, and no additional fees are owed. If you originally paid for regular processing time, the resubmitted document will be processed within the current posted regular time frame after we receive the resubmission, and no additional fees are owed. If you want to upgrade from regular processing to expedited processing, then you can pay the \$35.00 expedite fee when you resubmit the document.

Please Note: Companies must return the corrected document within thirty (30) calendar days of the rejection date to retain the original file date.

Return the following information to the Corporations Division (all pages must be legible):

1. A copy of this letter;
2. All pages of the rejected document with corrections OR a complete, signed, corrected document;
3. A NEW cover sheet indicating resubmission; and
4. Any additional paperwork or filing fees, as requested within this letter.

If you do not owe any additional fees or are paying by MOD account you can email your resubmission packet as a pdf document attachment to documentintake@azcc.gov.

If you have any questions, please feel free to contact the Customer Service Call Center at 602-542-3026, or Arizona residents only may use the toll free number 800-345-5819.

TO SUBSCRIBE TO THE ANNUAL REPORT EMAIL REMINDER SERVICE, GO ONLINE TO <http://ecorp.azcc.gov>. USE THE SERVICE FEATURE AND SELECT "SUBSCRIBE TO EMAIL REMINDER TO FILE ANNUAL REPORT." YOU CAN ALSO SUBSCRIBE USING THE SEARCH FEATURE TO FIND YOUR CORPORATION'S RECORD, THEN CLICK ON THE BUTTON FOR "ANNUAL REPORT EMAIL REMINDERS." IF YOU CHOOSE NOT TO SUBSCRIBE, YOU WILL NOT RECEIVE ANY REMINDER AT ALL FROM THE COMMISSION.

Tell us how we are doing. Take the online customer service survey at www.azcc.gov/divisions/Corporations.

X



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RECEIVED ARIZONA CORPORATION COMMISSION CORPORATIONS DIVISION
COVER SHEET

APR 04 2016

ARIZONA CORP. COMMISSION
CORPORATIONS DIVISION

USE A SEPARATE COVER SHEET FOR EACH DOCUMENT

1. WHAT ARE YOU FILING?

☐ New Entity ☐ Change to existing entity ☒ Re-submission/Correction

2. ENTITY NAME:

NAILS BY CJ, LLC

3. CALCULATE YOUR FEES (copies, certificate of good standing and expedited processing are all optional):

Document filing fee (fees are listed on the bottom of the form or on the fee schedule)	Subtotal:	
Do you want EXPEDITED processing? <input type="checkbox"/> YES <input type="checkbox"/> NO If YES, add \$35.00	Subtotal:	
<input type="checkbox"/> Corporation certified copies \$ 5.00 each x (enter number of copies requested)	Subtotal:	
<input type="checkbox"/> LLC certified copies \$10.00 each x (enter number of copies requested)	Subtotal:	
<input type="checkbox"/> Certificate of Good Standing \$10.00 each x (enter number of copies requested)	Subtotal:	
TOTAL YOUR AMOUNT OWED	TOTAL AMOUNT DUE:	

4. PAYMENT METHOD:

<input type="checkbox"/> MOD Account #
Cash - do not mail cash. Cash may be used only for in-person submittals. Checks or money orders - must be made payable to "Arizona Corporation Commission," with all words spelled out and no abbreviations. Checks must be completely and properly filled out, including the amount sections. UNACCEPTABLE CHECKS include: no imprinted or preprinted name and address of the account holder; no imprinted or preprinted check number; handwritten or stamped names, addresses, or check numbers; temporary checks (new accounts). Credit cards - may be used for in-person submittals, and for online corporation annual reports, online name reservations, or online certificates of good standing. We accept only Visa, MasterCard, and American Express.

5. REQUIRED - RETURN DELIVERY OPTION (PLEASE PRINT CLEARLY and select only ONE):

<input checked="" type="checkbox"/> Email	Email address: kdpickell@gmail.com	
<input type="checkbox"/> Pick up	Name:	Phone:
<input type="checkbox"/> Mail	Name:	
	Address:	
	City:	State: Zip:
	Phone:	

DOCUMENTS WILL BE MAILED IF THEY ARE NOT PICKED UP IN A TIMELY MANNER (APPROXIMATELY ONE WEEK)

FOR ARIZONA CORPORATION COMMISSION USE ONLY

PICK-UP BY: _____

DATE: _____

View current processing times at: www.azcc.gov/Divisions/Corporations/document-processing-times.pdf

